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Bib Data Sheet

CONFIRMATION NO. 5751

SERIAL NUMBER 10/727,056	FILING DATE 12/04/2003 RULE	CLASS 701	GROUP ART UNIT 3747	ATTORNEY DOCKET NO. 59278.00010
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APPLICANTS

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JAPAN 2002-354360 12/05/2002 ✓

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/04/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 38	TOTAL CLAIMS 96	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	Initials <i>DMH</i>		

ADDRESS

32294
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TITLE

Control system and method, and control unit

FILING FEE RECEIVED 2784	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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